

Application Data Sheet

Application Information

Application number::

Filing Date:: 11/09/01

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: PRACTICAL IN VITRO SIALYLATION OF
RECOMBINANT GLYCOPROTEINS

Attorney Docket Number:: 019957-011211US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: James
Middle Name:: C.
Family Name:: Paulson
Name Suffix::
City of Residence:: Del Mar
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 209 Torrey Pines Terrace
City of Mailing Address:: Del Mar
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 92014

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: J.
Family Name:: Bayer
Name Suffix::
City of Residence:: San Diego
State or Province of Residence:: CACA
Country of Residence:: USUS
Street of Mailing Address:: 6105 Dirac Street
City of Mailing Address:: San Diego
State or Province of mailing address:: CACA
Country of mailing address::
Postal or Zip Code of mailing address:: 92122

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Eric
Middle Name::
Family Name:: Sjoberg
Name Suffix::
City of Residence:: San Diego
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 12639 Crest Knolls Court
City of Mailing Address:: San Diego
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 92130

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Divisional of	09/007,741	01/15/98

Foreign Priority Information

Country::	Application number::	Filing Date::
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Assignee Information

Assignee Name::
Street of mailing address::

Postal or Zip Code of mailing address::